STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

MAY 09 2017

PLEASE PRINT

NEW HAMPSHIRE EPARTMENT OF STATE

I. Name of Lobbyist(s) Dario Scalco	DEPARTMENT O
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Fighters of New Hampshire (Name of partnership, firm or comporation)	<u>e</u>
43 Centre St. Concord NH 03301 Business Address: (Street) (Town/City) (State)	(Zip Code)
(013 223-33()4 (LO3 223-3310 e-mail davio (Fax)	been p.a.d
III. This statement covers: (Choose one – file separate reports for each client, OR you may fil reportable expense transactions which are not attributable to any one client).	e a separate report for
All reportable transactions occurring in the months prior to the reporting date relative to the fol	lowing client:
The Professional Fire Figurers of New Hampshire (Full Name of Client as it sepears on the Lobbyist Registration Form)	
OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm unrelated to any particular client.	n listed below which are
IV. Date of Report April 26, 2017 July 26, 2017 Lactivity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17	
October 25, 2017	
V. There have been no fees received and no reportable transactions made since the la If this box is checked, complete just this form and submit it to the Secretary of State's Office, State Concord, NH 03301.	
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendum A-Fees and Expen	
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report Expense Reimbursement	of Honorariums or
[If you, your firm, or your family has made political contributions, you must file Addendum C	– Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foreg and complete to the best of my knowledge and belief. 4/24/17 (Date)	oing information is true
(Date)	
(Print Name of Johnvist)	

L E A S E R N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Davio Stalco	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Fighter of New (Name of partnership, firm or corporation)	Hampshire
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The granded by any expenses:	t relations, or public relations services oss fee amount reported shall not be
a) Total of all fees received in this reporting period	a)\$_5,937.75
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$
c) Total of all fees received to date (Add lines a and b)	0)\$ 5,937.75
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$Ø
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of le being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of alle; meals purchased during a business ses than \$10 that is given to the personed with a value of \$25.00 or less); and orting period of greater than \$25.00 four of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b)\$
c) Total of all itemized expenditures reported in detail in section VI.	c)\$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
	4/24/17
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: The Professional Fire Fighter of
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client):
Date of Report (check one):
April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☐ January 31, 2018 ☐
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) 4/24/17 (Date)
Dario Scalco
(Print Name of lobbyist)